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**D4149-1**  
**Job Sheet 186656**



Part No: D4149-1

Job Qty: 20 ea

Part Name: Crosstube Lug Plate, Aft



Part Weight: 0 lbs

Status: New

Priority: Medium

Job Created: 11/19/18

Job Tracking No:

Due Date: 12/7/18

Created By: Marie Lajeunesse

Type: SOLD

Description:

Note: DWG REV C IPP Rev:A 10.06.24 new issue DD verf:EC IPP Rev:B 11.03.03 as per revC DD verf:JLM

Ship Via:

### Bill of Materials

### Job Routing

| Op No | Operation           | Qty    | Start Date | Due Date | Standard  |         | Workcenter/Supplier   |           | Sign-off            |
|-------|---------------------|--------|------------|----------|-----------|---------|-----------------------|-----------|---------------------|
|       |                     |        |            |          | Setup Hrs | Run Hrs | Workcenter / Supplier | Lead Time |                     |
| 100   | Waterjet - Flow - 1 | 20 pcs | 12/7/18    | 12/7/18  | 0.00      | 3.05    | Waterjet - Flow       |           | SC 18/12/04         |
| 110   | QC                  | 20 pcs | 12/7/18    | 12/7/18  | 0.00      | 0.00    | QC2 Waterjet-3        |           | SC 18/12/04         |
| 120   | QC                  | 20 pcs | 12/7/18    | 12/7/18  | 0.00      | 0.00    | QC8-4                 |           | DEC 12 2018 68      |
| 150   | Packaging           | 20 pcs | 12/7/18    | 12/7/18  | 0.00      | 0.00    | Packaging3            | ST080 JQ  | DEC 12 2018 9-89    |
| 160   | QC21-SA             | 20 Ea  | 12/7/18    | 12/7/18  | 0.00      | 0.00    | QC21                  |           | DEC 17 2018 21 9-89 |

### Job BOM

| Part / Item | Component Name      | Quantity             | Operation               | Container |
|-------------|---------------------|----------------------|-------------------------|-----------|
| M304S11GA   | 304/316 0.125 Sheet | 2.7100 sf (.1355 ea) | 100-Waterjet - Flow - 1 | 5114838   |

### Job Allocations

| Operation               | Component Part | Required | Inventory | Allocated |
|-------------------------|----------------|----------|-----------|-----------|
| 100-Waterjet - Flow - 1 | M304S11GA      | 3        | 40        | 0         |

### Part Specifications

Specifications could not be found.

Plex 11/19/18 3:10 PM Dart.lajeunesse.marie



DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE



QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Part <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |  |  |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Step #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <div style="position: relative; height: 150px;"> <div style="position: absolute; top: 0; right: 0; text-align: left; font-size: 0.8em;"> <b>DART</b><br/>AEROSPACE<br/>           Container No: S135824<br/>           Part: D4149-1<br/>           Job No: 186656<br/>           Serial No/Batch: S135824<br/>           Revision: _____<br/>           Inspector: _____<br/>           Exp Date: _____<br/>           Instructions: Various STC's<br/>           Date: 12/08/18         </div> </div>                                                                                                                                                                                                                                                                            |  |  |  |
| Description Work Order Deviat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div style="width: 45%;">           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |  | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">           Pressure/For <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not C <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div style="width: 45%;">           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> </div> |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |
| OTHER : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Completed By _____<br><br>and / Supervisor _____<br>Approval Verification _____<br><br>Coordinator approval _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |



|                                             |               |                             |
|---------------------------------------------|---------------|-----------------------------|
| <b>DART AEROSPACE LTD</b>                   |               | <b>Work Order:</b> 186656   |
| <b>Description:</b> Aft Crosstube Lug Plate |               | <b>Part Number:</b> D4149-1 |
| <b>Inspection Dwg:</b> D4149                | <b>Rev:</b> C | <b>Page 1 of 1</b>          |

### FIRST ARTICLE INSPECTION CHECKLIST

| Drawing Dimension | Tolerance     | Actual Dimension | Accept | Reject | Method of Inspection | Comments |
|-------------------|---------------|------------------|--------|--------|----------------------|----------|
| Ø0.129            | +0.005/-0.001 | Ø0.131           |        |        | USC-01               |          |
| Ø0.191            | +0.005/-0.001 | Ø0.192           |        |        | Tape                 |          |
| Ø0.257            | +0.006/-0.001 | Ø0.258           |        |        |                      |          |
| Ø0.38             | +0.006/-0.001 | Ø0.376           |        |        |                      |          |
| 0.380             | +/-0.010      | 0.379            |        |        |                      |          |
| 0.469             | +/-0.010      | 0.465            |        |        |                      |          |
| 0.310             | +/-0.010      | 0.309            |        |        |                      |          |
| 0.750             | +/-0.010      | 0.750            |        |        |                      |          |
| 3.25              | +/-0.030      | 3.252            |        |        |                      |          |
| 0.65              | +/-0.030      | 0.648            |        |        |                      |          |
| 0.63              | +/-0.030      | 0.629            |        |        |                      |          |
| 5.46              | +/-0.030      | 5.457            |        |        |                      |          |
| 3.80              | +/-0.030      | 3.802            |        |        |                      |          |
| 2.13              | +/-0.030      | 2.131            |        |        |                      |          |
| 1.313             | +/-0.010      | 1.315            |        |        |                      |          |
| 0.625             | +/-0.010      | 0.624            |        |        |                      |          |
| 0.375             | +/-0.010      | 0.376            |        |        |                      |          |
| 1.175             | +/-0.010      | 1.177            |        |        |                      |          |
| 0.752             | +/-0.010      | 0.750            |        |        |                      |          |
| 1.588             | +/-0.010      | 1.590            |        |        |                      |          |
| 1.587             | +/-0.010      | 1.586            |        |        |                      |          |
| 11.15             | +/-0.030      | 11.15            |        |        |                      |          |
| 0.750             | +/-0.010      | 0.753            |        |        |                      |          |
| 1.55              | +/-0.030      | 1.554            |        |        |                      |          |
| 1.12              | +/-0.030      | 1.119            |        |        |                      |          |
| 8.42              | +/-0.030      | 8.422            |        |        |                      |          |
| 2.70              | +/-0.030      | 2.701            |        |        |                      |          |
| 0.125             | +/-0.010      | 0.116            |        |        |                      |          |
| Ø0.252            | +0.003/-0.000 | Ø0.253           |        |        |                      |          |

|                        |                    |                              |
|------------------------|--------------------|------------------------------|
| <b>Measured by:</b> SC | <b>Audited by:</b> | <b>Preliminary Approval:</b> |
| <b>Date:</b> 18/12/04  | <b>Date:</b>       | <b>Date:</b>                 |

| Rev | Date     | Change                           | Revised by | Approved |
|-----|----------|----------------------------------|------------|----------|
| A   | 10.08.04 | New Issue                        | KJ         |          |
| B   | 12.02.01 | Dimensions updated per Dwg Rev C | KJ         |          |

